

UNITED STATES BANKRUPTCY COURT

DISTRICT OF SOUTH DAKOTA

\* \* \* \* \*

In the Matter of

Chapter 13 Case No. 04-40460

ALLAN GENE FLANIGAN

MOTION FOR AUTHORITY TO OBTAIN  
SECURED CREDIT AND  
REQUEST FOR PRELIMINARY HEARING

Debtor

\* \* \* \* \*

COMES NOW the above-referenced debtor, by and through his attorney of record, Thomas A. Blake, and moves the Court for an Order approving the debtor incurring secured debt.

1. Specifically, the debtor is requesting Court approval allowing him to enter into a contract to purchase a home, located at 327 S. Blauvelt, Sioux Falls, SD 57103, and legally described as:

Lot 8, Block 12, Phillips Addition, Minnehaha Co.,  
Sioux Falls, SD

2. Debtor proposes to obtain credit in the amount of \$67,367 to purchase the home and offer the home as security for the debt.
3. The sellers of the home are Jerry & Marilyn Cochran.
4. The total purchase price of the home is \$67,900.
5. The proposed mortgage amount is \$67,367.
6. The interest rate for the loan obtained to finance the home is 5.5%.
7. The monthly mortgage payment, which includes principal, interest, taxes & insurance is \$558.11.
8. The purchase of the home shall be financed through a loan with SDHDA. The loan will originate from Valley Bank of Sioux Falls.
9. Pursuant to Fed.R.Bankr.P. 4001(c)(2) and LBR 4001-3, Debtor requests preliminary authority to obtain \$67,367 in secured credit, on or before September 7, 2006, at noon, the scheduled closing date of the property.

10. A copy of the debtor's projected income and projected expenses

during the credit term are attached hereto as Exhibits "A" and "B".

11. The terms of the Plan shall not be affected by the purchase of this home.

WHEREFORE, Debtor hereby moves as aforesaid.

Dated this 30th day of August, 2006.

/s/ Thomas A. Blake  
Thomas A. Blake  
Attorney for Debtor  
505 W. 9th, Suite 202  
Sioux Falls, SD 57104  
(605) 336-1216  
FAX (605) 332-2897

IN RE **Flanigan, Allan Gene**

Case No. \_\_\_\_\_

Debtor(s) \_\_\_\_\_

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status <b>Divorced</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP <b>Son</b> <b>Son</b>	AGE <b>16</b> <b>14</b>
EMPLOYMENT: DEBTOR	SPOUSE	
Occupation <b>Kitchen Manager</b> Name of Employer <b>Dow Rummel Village</b> How long employed <b>6 Months</b> Address of Employer <b>Sioux Falls, SD</b>		

**INCOME:** (Estimate of average monthly income)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ <b>2,250.00</b>	\$ _____
2. Estimated monthly overtime	\$ _____	\$ _____
<b>3. SUBTOTAL</b>	<b>\$ 2,250.00</b>	\$ _____
<b>4. LESS PAYROLL DEDUCTIONS</b>		
a. Payroll taxes and Social Security	\$ <b>237.00</b>	\$ _____
b. Insurance	\$ _____	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify) _____	\$ _____	\$ _____
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 237.00</b>	\$ _____
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 2,013.00</b>	\$ _____
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) <b>Avera McKennan (Parttime)</b>	\$ <b>400.00</b>	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
<b>14. SUBTOTAL OF INCOME REPORTED ON LINES 7 THROUGH 13</b>	<b>\$ 400.00</b>	\$ _____
<b>15. TOTAL MONTHLY INCOME</b> (Add amounts shown on Lines 6 through 14.)	<b>\$ 2,413.00</b>	\$ _____
<b>16. TOTAL COMBINED MONTHLY INCOME</b> \$ <b>2,413.00</b> (Report also on Summary of Schedules)		

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

IN RE **Flanigan, Allan Gene**

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>558.11</u>
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ <u>125.00</u>
b. Water and sewer	\$ _____
c. Telephone	\$ <u>80.00</u>
d. Other <b>Cable</b>	\$ <u>25.00</u>
3. Home maintenance (repairs and upkeep)	\$ <u>10.00</u>
4. Food	\$ <u>450.00</u>
5. Clothing	\$ <u>100.00</u>
6. Laundry and dry cleaning	\$ <u>30.00</u>
7. Medical and dental expenses	\$ <u>75.00</u>
8. Transportation (not including car payments)	\$ <u>175.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>100.00</u>
10. Charitable contributions	\$ _____
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ _____
b. Life	\$ <u>10.00</u>
c. Health	\$ _____
d. Auto	\$ <u>60.00</u>
e. Other _____	\$ _____
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) _____	\$ _____
13. Installment payments (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ _____
b. Other _____	\$ _____
c. Other _____	\$ _____
14. Alimony, maintenance, and support paid to others	\$ <u>400.00</u>
15. Payments for support of additional dependents not living at your home	\$ _____
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ _____
17. Other <b>Misc.</b>	\$ <u>100.00</u>
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$ <u>2,298.11</u>

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

**None**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Total monthly income from Line 16 of Schedule I	\$ <u>2,413.00</u>
b. Total monthly expenses from Line 18 above	\$ <u>2,298.11</u>
c. Monthly net income (a. minus b.)	\$ <u>114.89</u>